## BUSINESS CERTIFICATE FOR PARTNERS

## St. Lawrence County, State of New York

The undersigned do hereby certify that they are conducting or transacting business as members of a partnership under the name or designation of:

| -  | (Business name)                           |   |   |   |
|--|---|---|---|---|
| -  | (Business street address)                 |   |   |   |
| •  |   | (Town) names of all the person conduct partners with the residence add  | -   |   |
| My full name and addr                            | ress is:                                  | My full name and address i  | is: ]   | My full name and address is                       |
|  |   | he successor in interest to:sons heretofore using such nan  |   |   |
| In witness whereof, I h signed this certificate. | ave this                                  | day of  | _ in the year                                 | , made and  |
| Name of owner                                    |   | Name of owner   |   | Name of owner                                     |
| Sign   |   | Sign  | _   | Sign  |
| Print  |   | Print   | _   | Print   |
| STATE OF NEW YOI<br>COUNTY OF ST. LA             |   | ss:   |   |   |
|  |   | in the year _<br>nd for said State, personally app  |   | before me, the                                    |
| whose name(s) is (are) executed the same in h    | subscribed<br>is/her/their<br>e person up | (business owner's name print to me on the basis of satisfact to the within instrument and a capacity(ies), and that by his/hon behalf of which the individual the instrument. | ory evidence<br>cknowledged<br>er/their signa | to me that he/she/they ture(s) on the instrument, |
| Nature of business:                              |   | Notary Public's Signature Filing fee \$25.00  |   |   |